Case 21-22168-JAD Doc 22 Filed 11/07/21 Entered 11/07/21 04:42:05 Desc Main Document Page 1 of 51

Fill in this infor	mation to identify your	case:			
Debtor 1	Daniel D Lane				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		WESTERN DISTRICT O	OF PENNSYLVANIA		
Case number	21-22168				
(if known)				☐ Chec	k if th
				amen	ded f

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	72,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,854.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	90,854.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	53,710.01
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,600.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	17,446.00
	Your total liabilities	\$	74,756.01
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,458.29
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,323.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
	■ Yes		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,113.10

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,600.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,600.00

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				Document	Page 3 of 51			_ 0000
Filli	n this information	on to identify yo	ur case and th	is filing:				
Debt		Daniel D Lane						
Debt		irst Name	Middle	Name	Last Name			
		irst Name	Middle	Name	Last Name			
Jnite	ed States Bankru	ptcy Court for the	: WESTERN	DISTRICT OF PENN	NSYLVANIA			
Case	e number 21-2	2168			_			☐ Check if this is an amended filing
	icial Form hedule <i>i</i>		pertv					12/15
	you own or have a No. Go to Part 2. Yes. Where is the		able interest in a	ny residence, building	, land, or similar property?			
.1 -	2770 Columbi Street address, if avai	a Avenue lable, or other descript	ion	ш .		the amount of	any secured	ims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
-	Pittsburgh City	PA 1	5221-0000 ZIP Code	☐ Manufactured ☐ Land ☐ Investment pr ☐ Timeshare	or mobile home	Current value entire propert		Current value of the portion you own?
				Other	t in the property? Check one		simple, tena if known.	our ownership interest ancy by the entireties, o
-	Allegheny			Debtor 2 only				
-	Allegheny County			Debtor 2 only Debtor 1 and At least one of	Debtor 2 only of the debtors and another ou wish to add about this itel	(see instruc	ctions)	munity property
-				Debtor 2 only Debtor 1 and At least one of Other information y property identification Residence	Debtor 2 only of the debtors and another ou wish to add about this itel	ப _{(see instruc} m, such as local	ctions)	munity property

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 21-22168-JAD Doc 22 Filed 11/07/21 Entered 11/07/21 04:42:05 Desc Main Document Page 4 of 51 Case number (if known) 21-22168 Debtor 1 Daniel D Lane 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Mitsubishi Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Lancer Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2017 Year: Debtor 2 only Current value of the Current value of the 69,856 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another Location: 2770 Columbia \$13,250.00 \$13,250.00 Avenue, Pittsburgh PA 15221 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$13,250,00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Various Household Goods & Furnishings **Summary Available Upon Request** \$2,000.00 Location: 2770 Columbia Avenue, Pittsburgh PA 15221 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Miscellaneous Electronics Summary Available Upon Request \$1,000.00 Location: 2770 Columbia Avenue, Pittsburgh PA 15221

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

☐ Yes. Describe.....

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De	ebtor 1	Daniel D Lar	ne		Case number (if known)	21-22168
10.	■ No		s, shotguns, ammunition, a	and related equipment		
11.	□ No		othes, furs, leather coats,	designer wear, shoes, accessories		
		200020				
			Clothing Location: 2770 Colu	mbia Avenue, Pittsburgh PA 152	21	\$250.00
12.	■ No		welry, costume jewelry, en	ngagement rings, wedding rings, heirloor	n jewelry, watches, gems,	gold, silver
13.	Exam _l	arm animals ples: Dogs, cats,	birds, horses			
			1 Dog & 1 Cat Location: 2770 Colu	ımbia Avenue, Pittsburgh PA 152	21	\$0.00
14.	■ No	ther personal and		did not already list, including any hea	lth aids you did not list	
15				n Part 3, including any entries for pag	jes you have attached	\$3,250.00
De	art 4: De	escribe Your Finan	cial Assots			
				t in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No			r home, in a safe deposit box, and on ha	and when you file your petil	ion
					Cash	\$32.00
17.				accounts; certificates of deposit; shares i unts with the same institution, list each.	n credit unions, brokerage	houses, and other similar
	_			Institution name:		
	. 33.		17.1. Checking	PNC Bank		\$322.00

page 3

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

18.		or publicly traded stocks investment accounts with be	rokerage firms, money market accounts		
	☐ Yes	Institution or issuer	r name:		
	Non-publicly traded sto joint venture ■ No	ock and interests in incorp	porated and unincorporated businesses	, including an interest in an LL	C, partnership, and
	☐ Yes. Give specific info	ormation about them Name of entity:		% of ownership:	
	Negotiable instruments Non-negotiable instruments	include personal checks, ca	otiable and non-negotiable instruments ashiers' checks, promissory notes, and mor cansfer to someone by signing or delivering	ney orders.	
	■ No	and the sale and the sale			
	☐ Yes. Give specific info	rmation about them Issuer name:			
		issuel flame.			
	Retirement or pension Examples: Interests in I No	accounts RA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pe	nsion or profit-sharing plans	
	Yes. List each account	t separately.			
		Type of account:	Institution name:		
		401(k)	TransCore		\$2,000.00
23.	■ No		Institution name or individual: ney to you, either for life or for a number of	years)	
	☐ Yes Iss	suer name and description.			
	Interests in an education 26 U.S.C. §§ 530(b)(1), 5		qualified ABLE program, or under a qua	lified state tuition program.	
		stitution name and description	on. Separately file the records of any intere	sts.11 U.S.C. § 521(c):	
	Trusts, equitable or fut ■ No □ Yes. Give specific info		other than anything listed in line 1), and	rights or powers exercisable f	for your benefit
	Patents, copyrights, tra	ademarks, trade secrets, a	and other intellectual property		
	Examples: Internet dom ■ No	ain names, websites, proce	eds from royalties and licensing agreemen	ts	
	☐ Yes. Give specific info	ormation about them			
	Examples: Building perr	and other general intangib mits, exclusive licenses, coo	les operative association holdings, liquor licens	ses, professional licenses	
	■ No□ Yes. Give specific info	ormation about them			
	oney or property owed to			Curr	ent value of the
	, , , , ,	,		porti	ion you own?

Schedule A/B: Property

Official Form 106A/B

page 4

claims or exemptions.

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De	ebtor 1	Daniel D Lane	Case number (if known)	21-22168
	Tax re	funds owed to you		
		Give specific information about them, including whether you alre-	ady filed the returns and the tax years	
	Exam	/ support ples: Past due or lump sum alimony, spousal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	■ No □ Yes.	Give specific information		
		amounts someone owes you ples: Unpaid wages, disability insurance payments, disability benefits; unpaid loans you made to someone else	efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	_	Give specific information		
		sts in insurance policies ples: Health, disability, or life insurance; health savings account (l	HSA); credit, homeowner's, or renter's insurar	ice
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	If you	sterest in property that is due you from someone who has die are the beneficiary of a living trust, expect proceeds from a life in- one has died.		eive property because
	_	Give specific information		
		s against third parties, whether or not you have filed a lawsui ples: Accidents, employment disputes, insurance claims, or rights		
		Describe each claim		
	Other	contingent and unliquidated claims of every nature, including	g counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
	■ No	nancial assets you did not already list Give specific information		
	— 103.	Give specific information	1	
36		the dollar value of all of your entries from Part 4, including and art 4. Write that number here		\$2,354.00
Pa	rt 5: De	escribe Any Business-Related Property You Own or Have an Interest I	n. List any real estate in Part 1.	
_		own or have any legal or equitable interest in any business-related p	roperty?	
_	_	Go to line 38.		
Pa		escribe Any Farm- and Commercial Fishing-Related Property You Own you own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
46.		u own or have any legal or equitable interest in any farm- or o	commercial fishing-related property?	
	_	. Go to Part 7.		
	⊔ Yes	s. Go to line 47.		
Do	-6-7-	Describe All Property Voy Own or Have an Interest in That You Die	I Not List Above	

Describe All Property You Own or Have an Interest in That You Did Not List Above

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Case number (if known) 21-22168 **Daniel D Lane** 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership $\hfill \square$ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$72,000.00 Part 2: Total vehicles, line 5 \$13,250.00 Part 3: Total personal and household items, line 15 57. \$3,250.00 Part 4: Total financial assets, line 36 \$2,354.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$18,854.00 Copy personal property total \$18,854.00 63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B page 6 Schedule A/B: Property

Debtor 1

\$90,854.00

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Fill in this infor	mation to identify your	case:	V	
Debtor 1	Daniel D Lane			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
	21-22168			
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt										
1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.												
☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)												
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)											
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.											
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption							
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.								
	2770 Columbia Avenue Pittsburgh,	\$72,000.00		\$25,150.00	11 U.S.C. § 522(d)(1)							
	PA 15221 Allegheny County Residence Fair Market Value Determined By Comparable Sales Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit)							
	2770 Columbia Avenue Pittsburgh,	\$72,000.00		\$1,325.00	11 U.S.C. § 522(d)(5)							
	PA 15221 Allegheny County Residence Fair Market Value Determined By Comparable Sales Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit								
	2017 Mitsubishi Lancer 69,856 miles Location: 2770 Columbia Avenue,	\$13,250.00		\$1,228.00	11 U.S.C. § 522(d)(2)							
	Pittsburgh PA 15221 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit								
	Various Household Goods & Furnishings	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)							
Summary Available Upon Reque Location: 2770 Columbia Avenue				100% of fair market value, up to any applicable statutory limit								

Line from Schedule A/B: 6.1

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De	btor 1 Daniel D Lane			Case number (if known)	21-22168
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Miscellaneous Electronics Summary Available Upon Request	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
	Location: 2770 Columbia Avenue, Pittsburgh PA 15221 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Clothing Location: 2770 Columbia Avenue,	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)
	Pittsburgh PA 15221 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	1 Dog & 1 Cat Location: 2770 Columbia Avenue,	\$0.00		\$0.00	11 U.S.C. § 522(d)(3)
	Pittsburgh PA 15221 Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$32.00		\$0.00	11 U.S.C. § 522(d)(5)
	Line Holli Generale PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: PNC Bank Line from Schedule A/B: 17.1	\$322.00		\$0.00	11 U.S.C. § 522(d)(5)
	Line from Goriodale 772. TTT			100% of fair market value, up to any applicable statutory limit	
	401(k): TransCore Line from Schedule A/B: 21.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(12)
	Ellie Holli Golloddie 172. 2111			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmen	t.)
	No				
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case?	,
	□ No □ Ves				
	☐ Yes				

Filed 11/07/21 Entered 11/07/21 04:42:05 Desc Main Case 21-22168-JAD Doc 22

		Document	Page 11 (of 51		
Fill in this information to i	dentify your	case:				
Debtor 1 Danie	I D Lane					
First Nam	e	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Nam	ie	Middle Name	Last Name			
United States Bankruptcy C	ourt for the:	WESTERN DISTRICT OF PENI	NSYLVANIA			
Case number 21-22168						
(if known)					☐ Check	if this is an
					amend	led filing
Official Forms 400D						
Official Form 106D			_	_		
Schedule D: Cre	editors \	Who Have Claims S	Secured	by Property	y	12/15
s needed, copy the Additional		wo married people are filing togethe t, number the entries, and attach it t				
number (if known).						
1. Do any creditors have claim		,				
□ No. Check this box a	and submit this	form to the court with your other	schedules. You	ı have nothing else to	report on this form.	
Yes. Fill in all of the i	information be	low.				
Part 1: List All Secured	Claims					
2. List all secured claims. If a	creditor has mo	re than one secured claim, list the cred	ditor separately	Column A	Column B	Column C
		particular claim, list the other creditors order according to the creditor's name		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Connexus Credit U	Jnion [Describe the property that secures the	he claim:	\$12,022.00	\$13,250.00	\$0.00
Creditor's Name	2	2017 Mitsubishi Lancer 69,85	56 miles			
		Location: 2770 Columbia Av	enue,			
Attn: Bankruptcy		Pittsburgh PA 15221 As of the date you file, the claim is: 0	Check all that			
Po Box 8026	a	apply.	one an unat			
Wausau, WI 54402		Contingent				
Number, Street, City, State &	_	Unliquidated				
Who owes the debt? Check		Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as n	nortgage or secui	red		
Debtor 2 only	•	car loan)	nortgago or occar			
Debtor 1 and Debtor 2 only	ī	☐ Statutory lien (such as tax lien, mec	hanic's lien)			
☐ At least one of the debtors a	_	Judgment lien from a lawsuit	. Idi ilo 3 iloiij			
☐ Check if this claim relates community debt		•	Auto Loan			

Opened 08/19 Last Active

Date debt was incurred 9/28/21

Last 4 digits of account number

0143

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Debtor 1	Daniel D L	.ane		Cas	Case number (if known) 21-22168			
	First Name	Middle Na	ame Last Name					
2.2 Q ui	cken Loans	S	Describe the property that secures th	ne claim:	\$41,688.01	\$72,000.00	\$0.00	
Attı 105	tor's Name n: Bankrupt 0 Woodwai roit, MI 482	rd Avenue	2770 Columbia Avenue Pittsk PA 15221 Allegheny County Residence Fair Market Value Determined Comparable Sales As of the date you file, the claim is: Capply.	d By				
	er, Street, City, S		☐ Contingent☐ Unliquidated					
Who owe:	s the debt? C	heck one.	Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only			☐ An agreement you made (such as m car loan)					
☐ Debtor	1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mech	nanic's lien)				
☐ At least	one of the deb	tors and another	☐ Judgment lien from a lawsuit					
	if this claim re unity debt	lates to a	Other (including a right to offset)	Mortgage				
Date debt	was incurred	Opened 08/16 Last Active 09/21	Last 4 digits of account numb	er <u>6017</u>				
If this is		of your form, add	olumn A on this page. Write that numb the dollar value totals from all pages.	er here:	\$53,710 \$53,710			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Documen	ıı Page	13 01 5) <u>T</u>			
Fill in this info	rmation to identify your cas	se:						
Debtor 1	Daniel D Lane							
	First Name	Middle Name	Last Nam	Э				
Debtor 2	-							
(Spouse if, filing)	First Name	Middle Name	Last Nam	9				
United States E	Bankruptcy Court for the:	VESTERN DISTRICT O	F PENNSYLVA	NIA				
Case number	21-22168							
(if known)	21-22100					☐ Check	if this is an	
						amend	led filing	
o E	1005/5							
Official For							4044=	
	E/F: Creditors Who						12/15	
Schedule G: Exe Schedule D: Cred left. Attach the C name and case n	ontracts or unexpired leases that cutory Contracts and Unexpired itiors Who Have Claims Secure ontinuation Page to this page. I umber (if known). All of Your PRIORITY Unse	d Leases (Official Form 10 d by Property. If more spa f you have no information	6G). Do not inclu ice is needed, co	ide any cre py the Part	ditors with partially s you need, fill it out, i	ecured claims that a number the entries in	are listed in n the boxes or	n the
	itors have priority unsecured c							
□ No. Go to	' '	aims against you?						
Yes.	rait 2.							
identify what possible, list Part 1. If mor	our priority unsecured claims. If type of claim it is. If a claim has be the claims in alphabetical order a re than one creditor holds a partic anation of each type of claim, see	oth priority and nonpriority a ccording to the creditor's na ular claim, list the other cred	amounts, list that on the lime. If you have no ditors in Part 3.	claim here a nore than tw	nd show both priority a	nd nonpriority amount	ts. As much as	· ·
2.1 Intern	al Revenue Service	Last 4 digits of a	account number	5619	\$3,600.00	\$3,600.00		00.08
	Creditor's Name			0010	Ψο,οσοίσο	Ψο,σσσ.σσ		,0.00
	ency Unit	When was the d	ebt incurred?	2018				
POB 7	7346 delphia, PA 19101							
Number	Street City State Zip Code	As of the date ye	ou file, the claim	is: Check a	Ill that apply			
Who incur	red the debt? Check one.	☐ Contingent						
■ Debtor	1 only	☐ Unliquidated						
☐ Debtor 2	2 only	☐ Disputed						
☐ Debtor	1 and Debtor 2 only	Type of PRIORI	TY unsecured cla	ıim:				
	one of the debtors and another	☐ Domestic sup	port obligations					
	f this claim is for a community	deht Taxes and ce	rtain other debts	ou owe the	government			
	n subject to offset?				u were intoxicated			
■ No	•	Other. Specify						
☐ Yes			Federal In	come Tax	(
Part 2: List	All of Your NONPRIORITY I	Jnsecured Claims						
3. Do any cred	itors have nonpriority unsecure	ed claims against you?						
☐ No. You I	nave nothing to report in this part.	Submit this form to the cou	rt with your other	schedules.				
_	2.		, ,					
Yes.								

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor	1 Daniel D Lane		Case number (if known) 21-22168	
4.1	Bank of America	Last 4 digits of account number	5966	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 982234 El Paso, TX 79998 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 12/06 Last Active 1/28/12 is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	_	o. Ollock all that apply	
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	o plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		
4.2	Capital One	Last 4 digits of account number	2421	\$6,484.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 05/03 Last Active 5/18/20	
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9661	\$1,603.00
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 12/11 Last Active 07/20	
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Credit Card	I	

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DCDIO	Daillei D Laile		21-22108	
4.4	Chase Card Services	Last 4 digits of account number	4086	\$942.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 11/16 Last Active 9/13/21	
	Who incurred the debt? Check one.	no or mo date you me, me orann	o. Oncox an unat appry	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	\square Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.5	Comenity Bank/Victoria Secret	Last 4 digits of account number	2767	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 11/15 Last Active 09/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.6	Midland Fund	Last 4 digits of account number	1930	\$1,592.00
	Nonpriority Creditor's Name Attn: Bankruptcy 350 Camino De La Reine, Suite 100 San Diego, CA 92108	When was the debt incurred?	Opened 03/21 Last Active 09/20	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	0 0 1	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Collection	for Comenity Bank	

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Case number (if known) Debtor 1 Daniel D Lane 21-22168 4.7 Payoff, Inc. Last 4 digits of account number 69EE \$2,700.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 04/19 Last Active 1700 Flight Way When was the debt incurred? 09/21 **Tustin, CA 92782** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unpaid balance on account □ ☐ Yes 4.8 **Square Capital** \$4,125.00 Last 4 digits of account number Nonpriority Creditor's Name 1455 Market Street When was the debt incurred? Suite 600 San Francisco, CA 94103 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unpaid balance on account □ Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? American Info Source Lp Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Post Office Box 248848 Part 2: Creditors with Nonpriority Unsecured Claims Oklahoma City, OK 73124-8848 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? American Info Source Lp Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Post Office Box 248848 ■ Part 2: Creditors with Nonpriority Unsecured Claims Oklahoma City, OK 73124-8848 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Comenity Bank-Bankruptcy Dept. Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 183043 Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Internal Revenue Service Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims **Insolvency Unit** ☐ Part 2: Creditors with Nonpriority Unsecured Claims **POB 628**

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Debtor 1 Daniel D Lane		Ū	Case number (if known)	21-22168					
Pittsburgh, PA 15230	Last 4 digits of account number								
Name and Address	On which entry in Part 1 or Part	2 did	you list the original creditor?						
Internal Revenue Service	Line 2.1 of (Check one):		■ Part 1: Creditors with Priority Unsecured Claims						
1000 Liberty Avenue Room 727 Pittsburgh, PA 15222			☐ Part 2: Creditors with Nonpriority Unsecured Claims						
1 1105digii, 1 7 10222	Last 4 digits of account number								
Name and Address	On which entry in Part 1 or Part	2 did	you list the original creditor?						
Robertson, Anschutz, Schneid,	Line 4.4 of (Check one):		☐ Part 1: Creditors with Prior	ity Unsecured Claims					
Crane and Partners, PLLC 130 Clinton RD #202 Fairfield, NJ 07004			■ Part 2: Creditors with Nonp	priority Unsecured Claims					
•	Last 4 digits of account number	-							

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	3,600.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,600.00
	6f.	Student loans	6f.	\$	Total Claim
otal claims rom Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,446.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	17,446.00

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Fill in this infor	ormation to identify your case:				
Debtor 1	Daniel D Lane				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	OF PENNSYLVANIA		
Case number	21-22168				
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					_
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3	Oity		Olaic	Zii Gode	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	Oity		Otate	ZII Oode	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	nt Page 19 c	01 51	
Fill in this	information to identify your	case:			
Debtor 1					
Deptor 1	Daniel D Lane First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case num	ber 21-22168				
(if known)	21-22100				☐ Check if this is an
					amended filing
Officia	l Form 106H				
Schod	lule H: Your Cod	ahtars			12/15
JUILEU	idle II. Todi Cod	CDIOI 3			12/15
■ No □ Yes 2. With Arizon ■ No.	you have any codebtors? (If shin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	ս lived in a community p , Nevada, New Mexico, Pu	roperty state or territor lerto Rico, Texas, Wash	ry? (Community property	states and territories include
in line Form out Co	2 again as a codebtor only	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 166G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lii	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
				_	
3.2	Name			Schedule D, line	
	INAIIIC			☐ Schedule E/F, lii	
				☐ Schedule G, line	9
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information	to identify your ca	ase.				1					
	btor 1	Daniel D Lar										
	btor 2 buse, if filing)					_						
Uni	ited States Bankrup	otcy Court for the	WESTERN DISTRIC	Γ OF PENNSYLVAN	IIA							
	se number 21	-22168		-					ed filing ent showin	g postpetition		
	fficial Form		ome				_	MM / DD/ `		Snowing date.	12/15	
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you et to this form. One Employment	sible. If two married ped are married and not fili r spouse is not filing w On the top of any additi	ng jointly, and you ith you, do not incl	spouse ude infor	is liv mati	ing with on abou	you, incl t your sp	lude inforr ouse. If me	nation about ore space is	your needed,	
١.	information.	ioyin e nt		Debtor 1						ling spouse		
	If you have more than one job, attach a separate page with information about additional employers.		Employment status	■ Employed□ Not employed	_				☐ Employed ☐ Not employed			
	Include part-time self-employed wo		Occupation Employer's name	Technician TransCore								
	Occupation may or homemaker, if		Employer's address	4415 Lewis Ro Harrisburg, PA								
			How long employed t	here? 3 year	S			_				
Esti spoi	imate monthly incuse unless you are	separated. spouse have mo	ate you file this form. If	,	·	•	·	that perso	on on the li	·	J	
2.			ry, and commissions (becalculate what the monthle		2.	\$	4	,914.97	\$	N/A		
3.	Estimate and lis	st monthly overti	me pay.		3.	+\$		0.00	+\$	N/A		
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	4,9	14.97	\$	N/A		

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Daniel D Lane	-	C	Case number (if k	nown)	21-22	168		
	Cor	by line 4 here	4.		For Debtor 1	1 07		Debtor : filing s	2 or pouse N/A	
	•	-	٠.		4,31	+.31	Ψ		IVA	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 1,112		\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b			0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	50		. — — — — — — — — — — — — — — — — — — —	0.00	\$		N/A	_
	5d. 5e.	Insurance	5d 5e			0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		·	4.46 0.00	\$ 		N/A N/A	_
	5g.	Union dues	5g		· —	0.00	\$		N/A	_
	5h.	Other deductions. Specify:			·		+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ 1,450		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 3,45		\$		N/A	_
8.	List 8a.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	٥L	monthly net income. Interest and dividends	88			0.00	\$		N/A	_
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8b			0.00	`		N/A	_
	٥.	settlement, and property settlement.	80			0.00	\$		N/A	_
	8d.	• • •	80			0.00	\$		N/A	_
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e	.	Φ	0.00	Φ		N/A	_
	Oi.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$		N/A	
	8g.	Pension or retirement income	80	j .	\$	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	0.00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0.00	\$		N/A	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3,458.29	+ \$		N/A	= \$	3,458.29
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			0,100120				Ľ.	0,1001_0
11.	othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe				•	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certaillies						12.	\$	3,458.29
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?					·	Combi month	ned ly income
	Ē	Yes. Explain: Debtor is no longer wroking at PNC Park								

Official Form 106l Schedule I: Your Income page 2

	in this informa	tion to identify yo	our case:			I		
Deb		Daniel D Lar				Charl	c if this is:	
Deb	101 1	Daniei D Lai	16				An amended filing	
	tor 2 buse, if filing)							ving postpetition chapter the following date:
`'	, 0,	untay Court for the	· \//EQTE	ERN DISTRICT OF PENNS	SVI \/ANIIA	_	MM / DD / YYYY	
		. ,	e. WESTE	ERN DISTRICT OF PENNS	STLVAINIA	יו	WIWI / DD / TTTT	
	e number 21 nown)	-22168						
Of	ficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this i n.				
Part		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□ N							
	☐ Y	es. Debtor 2 mus	st file Offic	al Form 106J-2, Expenses	for Separate House	ehold of Debto	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.			-			☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.		enses include f people other t	han	No				
	•	d your depende		Yes				
Part	t 2: Estim	ate Your Ongoi	ng Month	ly Expenses				
exp	imate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance it cluded it on Schedule I: Y			Your exp	enses
(0	10101 1 01111 10	o,						
4.		r home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4. \$		0.00
	If not includ	led in line 4:						
		estate taxes				4a. \$		0.00
	•	rty, homeowner's	•			4b. \$ 4c. \$		0.00
		maintenance, re owner's associa		upkeep expenses dominium dues		4c. \$		100.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

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Deb	tor 1	Daniel I	O Lane	Case	num	ber (if known)	21-22168
6.	Utilit	ties:					
-	6a.		y, heat, natural gas		6a.	\$	289.00
	6b.		ewer, garbage collection		6b.	\$	79.00
	6c.	-	ne, cell phone, Internet, satellite, and cable services		6c.	\$	295.00
	6d.	Other. Sp			6d.	·	0.00
7.			sekeeping supplies		7.	·	400.00
8.			children's education costs		8.		0.00
9.			dry, and dry cleaning		9.	\$	75.00
		•	products and services		10.	•	125.00
11.			ental expenses		11.		100.00
			1. Include gas, maintenance, bus or train fare.		11.	Ψ	100.00
12.			car payments.		12.	\$	300.00
13.			, clubs, recreation, newspapers, magazines, and books		13.	\$	200.00
			stributions and religious donations		14.		0.00
		rance.	and tenglous defiations		17.	Ψ	0.00
15.			insurance deducted from your pay or included in lines 4 or 20	ı			
		Life insur			5a.	\$	0.00
		Health in			5b.	·	0.00
		Vehicle in			5c.	·	110.00
			surance. Specify:		5d.		0.00
16			nclude taxes deducted from your pay or included in lines 4 or		Ju.	Ψ	0.00
	Spec	cify:	, , ,	20.	16.	\$	0.00
17.			lease payments:				
			nents for Vehicle 1		7a.	·	0.00
		, ,	nents for Vehicle 2	1	7b.	\$	0.00
	17c.	Other. Sp	pecify:	1	7c.	\$	0.00
	17d.	Other. Sp	pecify:	1	7d.	\$	0.00
18.			s of alimony, maintenance, and support that you did not r your pay on line 5, <i>Schedule I, Your Incom</i> e (Official For		18.	\$	0.00
19.			ts you make to support others who do not live with you.	,		\$	0.00
	Spec		,		19.	·	
20.	•	,	perty expenses not included in lines 4 or 5 of this form or	on Schedule	l: Yo	our Income.	
			es on other property		0a.		0.00
		Real esta		2	0b.	\$	0.00
	20c.	Property.	homeowner's, or renter's insurance	2	20c.	\$	0.00
			ince, repair, and upkeep expenses		0d.	·	0.00
			ner's association or condominium dues		:0e.	*	0.00
21		er: Specify:			21.	·	150.00
۷۱.		. ,	•		۷۱.	· -	
	Pet	Care Exp	enses			+\$	100.00
22.	Calc	ulate your	monthly expenses				
			4 through 21.			\$	2,323.00
			22 (monthly expenses for Debtor 2), if any, from Official Form	106J-2		\$,=====
			2a and 22b. The result is your monthly expenses.			\$	2 222 00
	220.	Auu IIIIe Zz	za and 22b. The result is your monthly expenses.			Φ	2,323.00
23.	Calc	ulate your	monthly net income.				
			e 12 (your combined monthly income) from Schedule I.	2	3a.	\$	3,458.29
			ur monthly expenses from line 22c above.	2	3b.	-\$	2,323.00
		.,,	- '				
	23c.		your monthly expenses from your monthly income. It is your <i>monthly net incom</i> e.	2	23c.	\$	1,135.29
		1110 1030	icio you. Monuny nocinoomo.	_	-		
24.	For ex modif	xample, do y	an increase or decrease in your expenses within the year you expect to finish paying for your car loan within the year or do you e e terms of your mortgage?				ease or decrease because of a
	■ N		[=				
	☐ Ye	es.	Explain here:				

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Fill in this inf	ormation to identify your	case:			
Debtor 1	Daniel D Lane				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nove	Last Manya		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA		
Case number	21-22168				
(if known)				☐ Check if the amended	
f two married You must file obtaining mon years, or both	people are filing together this form whenever you fi ney or property by fraud ir . 18 U.S.C. §§ 152, 1341, 1	r, both are equally responders bankruptcy schedules a connection with a bank			
S	ign Below				
Did you ■ No	pay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
□ Yes	. Name of person			Attach Bankruptcy Petition Prepa Declaration, and Signature (Office	
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
X /e/ D	aniel D Lane		X		
	iel D Lane		Signature of Do	ebtor 2	
	ature of Debtor 1		, and the second		
Date	November 7, 2021		Date		

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		rmation to identify you	case:			
De	btor 1	Daniel D Lane First Name	Middle Name	Last Name		
Del	btor 2	. not realing	madio Name	2401.14.110		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States E	sankruptcy Court for the:	WESTERN DISTRICT O	F PENNSYLVANIA		
Ca	se number	21-22168				
	nown)					heck if this is an
					a	mended filing
<u>Of</u>	ficial F	orm 107				
St	atemen	t of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/19
Be a	as complete	and accurate as possi	ble. If two married people	are filing together, both are	equally responsible for sup	plying correct
		more space is needed, wn). Answer every ques		this form. On the top of any	y additional pages, write you	ir name and case
		, , , , , , , , , , , , , , , , , , , ,				
Pa	rt 1: Give	Details About Your Ma	rital Status and Where You	u Lived Before		
1.	What is yo	ur current marital statu	ıs?			
	☐ Marrie	ed				
	■ Not m	arried				
2.	During the	last 3 years have you	lived anywhere other than	where you live now?		
	During the	last o years, have you	iived arrywriere outer triair	where you live now :		
	■ No					
	☐ Yes. L	ist all of the places you l	ived in the last 3 years. Do n	ot include where you live now	' .	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,		, ·, · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	■ No	Anton accordance fill and Cal	aaduda II. Varin Cadabtana (C	M: a: a Farma 4.001)		
	☐ Yes. N	hake sure you fill out Scr	nedule H: Your Codebtors (C	miciai Form 106H).		
Pai	rt 2 Expl	ain the Sources of You	r Income			
4	Did you ba	ve any income from en	anloyment or from operation	na a husiness durina this ve	ear or the two previous caler	ndar voare?
•	Fill in the to	otal amount of income yo	u received from all jobs and	all businesses, including part-	time activities.	iuai yeais:
	If you are fi	ling a joint case and you	have income that you receive	ve together, list it only once ur	der Debtor 1.	
	□ No					
	Yes. F	fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Fro	m January	1 of current year until	-	\$42,670.59	□ Wagon commissions	13.3.3.10)
		led for bankruptcy:	■ Wages, commissions, bonuses, tips	φ4 ∠, 070.39	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
			- Operating a business		, 3	

Official Form 107

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	last caler nuary 1 to	dar year: December 3	31, 2020)	■ Wages, commissions, bonuses, tips	\$54,093.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$60,185.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	and other winnings. List each s	public benef If you are fili	it payments; ng a joint cas ne gross inco	er that income is taxable. Exa pensions; rental income; inter le and you have income that y ome from each source separat	est; dividends; money collector received together, list it	cted from lawsuits; only once under De	royalties; and ebtor 1.	
				Dahtau 4		Dahtan 0		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6.	□ No.	Neither De individual puring the No. Yes * Subject to Debtor 1 of	Postor 1 nor Derimarily for a serimarily	each creditor to whom you paideditor. Do not include payment payments to an attorney for the on 4/01/22 and every 3 years or both have primarily consume you filed for bankruptcy, dieseach creditor to whom you paideditor.	mer debts. Consumer debted purpose." d you pay any creditor a total of \$6,825* or more ts for domestic support oblinis bankruptcy case. Is after that for cases filed on mer debts. d you pay any creditor a total data total of \$600 or more an	al of \$6,825* or more pay gations, such as che or after the date or all of \$600 or more?	re? rments and the support an	he total amount you and alimony. Also, do t creditor. Do not
			include pay	ments for domestic support of this bankruptcy case.				
	Creditor	's Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider				ccount of a d	ebt that benefited an			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name			
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	ie case			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	foreclosed, garnis	hed, attache	d, seized, or levied?			
	Creditor Name and Address	Describe the Property		Date	Date Value of the property				
		Explain what happened							
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No ☐ Yes. Fill in the details. Creditor Name and Address				, set off any a	amounts from your Amount			
	Cleditor Name and Address	Describe the action the	creditor took	taken		Amount			
Pai	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes List Certain Gifts and Contributions	another official?		-					
13.	Within 2 years before you filed for bankrup ■ No	otcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?			
	Yes. Fill in the details for each gift.	Dosoriho the sitte		Detec	VOIL GOVO	Value			
	Gifts with a total value of more than \$600 per person	Describe the gifts		the g	s you gave ifts	Value			
	Person to Whom You Gave the Gift and Address:								

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or			with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did you	ı lose anyth	ning because of thef	t, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List ace claims on line 33 of Schedule A/B: Pro	pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer		ice dialitis of line 33 of ochecule A/B. The	эрспу.		
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition processing the No Yes, Fill in the details.	preparir	ng a bankruptcy petition?			rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propert transferred	у	Date payment or transfer was made	Amount of payment
	Willis & Associates 201 Penn Center Blvd Suite 310 Pittsburgh, PA 15235		costs \$500.00 fees \$1,000.00		September 30, 2021	\$1,000.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o	r to make payments to your creditors?		r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propert transferred	у	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	u r busin s made a	ess or financial affairs? as security (such as the granting of a secu			
	Person Who Received Transfer Address		property transferred		ny property or received or debts change	Date transfer was made

Person's relationship to you

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

19.	within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No		property to a	a self-settle	d trust or similar device	of which you are a		
	☐ Yes. Fill in the details.							
	Name of trust	Description and va	lue of the pro	operty trans	sferred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit E	Boxes, and S	torage Unit	ts			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit u houses, pension funds, cooperatives, associations, and other financial institutions. No							
	Yes. Fill in the details.							
			Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for b	oankruptcy, a	ıny safe de	posit box or other depos	itory for securities,		
	No							
	Yes. Fill in the details.	1471				5 (111		
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Streen State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or ha to it? Address (Number, Stre State and ZIP Code)		Describe	the contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control fo	or Someone Else						
23.	Do you hold or control any property that some for someone.	eone else owns? Includ	de any prope	rty you bor	rowed from, are storing f	for, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)		Describe	the property	Value		
Par	t 10: Give Details About Environmental Inform	mation						
For	the purpose of Part 10, the following definition	s apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	water, groun	• .				
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	as defined under any en		law, wheth	er you now own, operate	e, or utilize it or used		
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

24.	Has any governmental unit notified you that yo ■ No	u may be liable or potentially liable u	nder or in violation of an environme	ntal law?				
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	y release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admini	istrative proceeding under any enviro	nmental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Cor	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	business?				
	lacksquare A sole proprietor or self-employed in a	trade, profession, or other activity, e	ther full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	tive of a corporation						
	☐ An owner of at least 5% of the voting of	r equity securities of a corporation						
	No. None of the above applies. Go to Part	: 12.						
	Yes. Check all that apply above and fill in	the details below for each business.						
		escribe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed							
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement to	anyone about your business? Inclu	de all financial				
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)							

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Case number (if known) 21-22168 Debtor 1 Daniel D Lane Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Daniel D Lane **Daniel D Lane** Signature of Debtor 2 Signature of Debtor 1 Date November 7, 2021 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Fill in this inform	Fill in this information to identify your case:							
Debtor 1	Daniel D Lane							
Debtor 2 (Spouse, if filing)								
United States Bankruptcy Court for the:		Western District of Pennsylvania						
Case number (if known)	21-22168							

Check	as directed in lines 17 and 21:
	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.
	Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	Part	1: Calculate Your Average Monthly Income							
Ī	1.	What is your marital and filing status? Check one of	only.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11							
	10 th	Il in the average monthly income that you received from a pt (10A). For example, if you are filing on September 15, the 6-ee 6 months, add the income for all 6 months and divide the tothouses own the same rental property, put the income from that	month peal by 6. F	eriod would fill in the re	be March 1 throsult. Do not include	ugh August 3 de any incom	31. If the ame	ount of your monthly incom nore than once. For examp	ne varied during le, if both
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and c	ommissio	ons (before all	\$5	,113.10	\$	
	3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e paym	ents from	a spouse if	\$	0.00	\$	
	4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spot you listed on line 3.	r t. Includ	de regulai depende	r contributions nts, parents,	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debto	r 1					
l		Gross receipts (before all deductions)	\$_	0.00					
l		Ordinary and necessary operating expenses	- \$ _	0.00					
l		Net monthly income from a business, profession, or fa	arm \$_	0.00	Copy here ->	\$	0.00	\$	
l	6.	Net income from rental and other real property	Debto						
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	- \$ _	0.00					
1		Net monthly income from rental or other real property	Φ	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor	Daniel D Lane		Case number	(if known)	21-22168			
			Column A Debtor 1		Column B Debtor 2 c non-filing			
7. I	nterest, dividends, and royalties		\$	0.00	\$			
8. l	Jnemployment compensation		\$	0.00	\$			
[Do not enter the amount if you contend that the amount received was a bene he Social Security Act. Instead, list it here:	fit under	·		·			
	·	.00						
	For your spouse \$							
t r l c	Pension or retirement income. Do not include any amount received that was benefit under the Social Security Act. Also, except as stated in the next senter to the include any compensation, pension, pay, annuity, or allowance paid by the Jnited States Government in connection with a disability, combat-related injudisability, or death of a member of the uniformed services. If you received any paid under chapter 61 of title 10, then include that pay only to the extent does not exceed the amount of retired pay to which you would otherwise be of retired under any provision of title 10 other than chapter 61 of that title.	ence, do ne nry or y retired that it	\$	0.00	\$			
10. I	ncome from all other sources not listed above. Specify the source and are not include any benefits received under the Social Security Act; payments under the Federal law relating to the national emergency declared by the Presunder the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to coronavirus disease 2019 (COVID-19); payments received as a victim of a waterime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability death of a member of the uniformed services. If necessary, list other sources separate page and put the total below.	s made esident the ear						
	oparato pago ana pat tro total polon.		\$	0.00	\$			
			\$	0.00	\$			
	Total amounts from concrete names if any		· —		Ψ			
	Total amounts from separate pages, if any.	+	\$	0.00				
	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Determine How to Measure Your Deductions from Income	\$	5,113.10	+ \$ _			5,113.10	
ai t z	Determine now to measure rour beductions nom income							
	Copy your total average monthly income from line 11.					\$	5,113.10)
13. (Calculate the marital adjustment. Check one:							
	You are not married. Fill in 0 below.							
[You are married and your spouse is filing with you. Fill in 0 below.							
[☐ You are married and your spouse is not filing with you.							
	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse' Below, specify the basis for excluding this income and the amount of inc	's suppo	rt of someone	other th	an you or you	ır depende	ents.	
	adjustments on a separate page.				·			
	If this adjustment does not apply, enter 0 below.	•						
		•		_				
				_				
		+\$						
	Total	\$	0.00	<u> </u>	py here=>		0.	.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	5,113.10)
15.	Calculate your current monthly income for the year. Follow these steps	:						
	15a. Copy line 14 here=>					\$	5,113.10)
	roa. Copy mile i i noice—							_

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Debtor 1	Daniel D Lane	Case number (if known)	21-22168	
	Multiply line 15a by 12 (the number of months in a year).		x 12	
15	o. The result is your current monthly income for the year for this par	t of the form	\$\$.20

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Debt	or 1	Dai	niel D Lane			Case number (if known)	21-22168		
16	. Cal	culat	e the median fan	nily income that applies to yo	u. Follow these s	steps:			
	16a	. Fill i	n the state in which	ch you live.	PA	_			
	16b	. Fill i	n the number of p	people in your household.	1				
	16c	. Fill i	n the median fam	ily income for your state and si	ze of household.	_		\$	57,919.00
				able median income amounts, rm. This list may also be availa		ne link specified in the separate			
17	. Ηο ν		the lines compa	•		ptoy otoriko omoo.			
	17a	. [1 of this form, check box 1, Dispetion of Your Disposable Income			
	17b	. •	1325(b)(3). G		ation of Your Dis	rm, check box 2, <i>Disposable inc</i> sposable Income (Official Forr			
Par	t 3:	C	alculate Your Co	mmitment Period Under 11 U	.S.C. § 1325(b)(4	1)			
18.	Cop	у уо	ur total average	monthly income from line 11	·		\$		5,113.10
19.									
	19a	. If th	e marital adjustme	ent does not apply, fill in 0 on li	ne 19a.		-\$		0.00
	405	CI	tunnt live 40n from	lin a 40					E 112 10
	190	. Suc	tract line 19a fro	om line 18.				\$	5,113.10
20.	Cal	culat	e your current m	onthly income for the year.	Follow these step	S:			
			-		·			\$	5,113.10
	Multiply by 12 (the number of months in a year).								: 12
	20b. The result is your current monthly income for the year for this part of the form								61,357.20
	200	Con	v the median fam	ily income for your state and si	zo of household f	irom lino 160		\$	57,919.00
	20c. Copy the median family income for your state and size of household from line 16c								
	21. How do the lines compare?								
			Line 20b is less period is 3 years		ordered by the o	court, on the top of page 1 of this	s form, check bo	эх 3, 7	he commitment
				e than or equal to line 20c. Unle iod is 5 years. Go to Part 4.	ss otherwise ord	ered by the court, on the top of p	page 1 of this fo	rm, ch	eck box 4, The
Par	t 4:	Si	gn Below						
	By	signin	g here, under per	nalty of perjury I declare that the	e information on t	his statement and in any attachr	ments is true ar	id corr	ect.
)	_		iel D Lane						
			D Lane re of Debtor 1						
		e <u>N</u> o	ovember 7, 202	21					
	If vo		M / DD / YYYY ecked 17a. do NC	T fill out or file Form 122C-2.					
	, .			00. 00 / 0 / 1220 2.					

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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E:II :-	Alaia infawa atia	n to identify.									
FIII IN	this informatio	n to identify yo	ur case:								
Debto	r 1 Dani	el D Lane									
Debto (Spou	r 2 se, if filing)										
United	d States Bankrup	tcy Court for the:	Western Dis	strict of Pennsy	vlvania						
Case number (if known) 21-22168									an amende	ended filing	
	npter 13 (Calculatio	n of You	ur Dispo	sable lı	ncome				04/19	
		ou will need you Official Form 12		copy of <i>Chapte</i>	er 13 Stateme	ent of Your Cu	rrent Monthly	y Income a	nd Calculatio	on of	
space	is needed, atta	ccurate as poss ch a separate sh e your name an	eet to this for	m, Include the							
Part 1	Calculate	Your Deduction	s from Your I	ncome							
the	questions in li	ue Service (IRS nes 6-15. To find so be available	the IRS stand	dards, go onlir	ne using the						
exp	enses if they are	amounts set out higher than the deduct any amo	standards. Do i	not include any	operating exp	penses that you	ı subtracted fı	om income	se some of you	our actual d 6 of Form	
If yo	our expenses dif	fer from month to	month, enter t	he average exp	pense.						
Not	e: Line numbers	1-4 are not used	in this form. TI	hese numbers	apply to inforr	mation required	by a similar fo	orm used in	chapter 7 ca	ses.	
5.	The number of	f people used ir	determining	your deductio	ons from inco	me					
	plus the number	per of people who er of any addition people in your ho	al dependents						1		
Nat	tional Standard	S You m	ust use the IR:	S National Star	ndards to ansv	wer the question	ns in lines 6-7				
6.		g, and other iten n the dollar amou				d in line 5 and t	ne IRS Nation	al	\$	723.00	
7.	the dollar amore	health care allount for out-of-poo e 65 or olderbed s IRS amount, yo	ket health care ause older ped	. The number opple have a hig	of people is sp ther IRS allow	olit into two cate ance for health	goriespeopl	e who are u	inder 65 and		

Official Form 122C-2

Daniel D Lane 21-22168 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 68.00 Copy here=> 68.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 142 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f \$ 68.00 Copy total here=> 68.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 534.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 894.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Quicken Loans** 567.61 Сору Repeat this amount 567.61 9b. Total average monthly payment 567.61 here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 326.39 326.39 or rent expense). If this number is less than \$0, enter \$0. here=>

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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ebtor 1	Daniel D Lane			Case number (if	known) 21	-22168	
11.	Local transportation expenses: Check the number of veh	nicles for which y	ou claim a	ın ownership	or operatin	g expense.	
	□ 0. Go to line 14.						
	■ 1. Go to line 12.						
	☐ 2 or more. Go to line 12.						
12.	Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for						274.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.						
Vel	hicle 1 Describe Vehicle 1: 2017 Mitsubishi Lance Avenue, Pittsburgh P.		s Location	on: 2770 C	olumbia		
13a.	Ownership or leasing costs using IRS Local Standard			\$	533.00		
13b.	Average monthly payment for all debts secured by Vehicle	1.					
	Do not include costs for leased vehicles.						
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mo bankruptcy. Then divide by 60.						
	Name of each creditor for Vehicle 1	Average mo	onthly				
	Connexus Credit Union	\$	221.40				
	Total Average Monthly Payment	\$	221.40	Copy here => -\$	22	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$	60, enter \$0		\$	311.60	Copy net Vehicle 1 expense here => \$	311.60
Vel	hicle 2 Describe Vehicle 2:						
13d.	Ownership or leasing costs using IRS Local Standard			\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle leased vehicles.	2. Do not include	e costs for				
	Name of each creditor for Vehicle 2	Average mo	onthly				
		\$					
	Total average monthly payment	\$		Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense					Copy net	
	Subtract line 13e from line 13d. if this number is less than \$	30, enter \$0		\$	0.00	Vehicle 2 expense here => \$ _	0.00
14.	Public transportation expense: If you claimed 0 vehicle Public Transportation expense allowance regardless of					n the \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Tran</i> .	what you believe					0.00

Debtor 1

Debtor 1 Daniel D Lane Case number (if known) 21-22168

	er Necessary Expenses	In addition to the expense the following IRS categorie		s listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, soc	ial security taxes, and Medi owever, if you expect to recomment to total monthly amoun	care taxe eive a tax	s. You may ind refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	1,138.21
17.	Involuntary deductions: T	•	ductions t	hat vour iob red	quires, such as retirement	· —	
	contributions, union dues, a	and uniform costs.				Φ.	0.00
		, ,, ,	•	,	11(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						0.00
19.	 Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 						0.00
20	Education: The total month	-				· —	
_0.	as a condition for your jo	, , , ,	oddodiioi	T trick to ottrior i	ioquiiou.		
	for your physically or me	ntally challenged depender	nt child if r	no public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total month Do not include payments fo				sitting, daycare, nursery, and preschool.	\$	0.00
22.	Additional health care exp	penses, excluding insurar th and welfare of you or you	r depende	: The monthly ents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		
	Payments for health insurar	nce or health savings accou	ınts shoul	d be listed only	y in line 25.	\$	32.00
23.	Optional telephone and to for you and your dependent phone service, to the exten income, if it is not reimburs. Do not include payments for expenses, such as those re	+\$	150.00				
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	ense allo	wances.		\$	3,557.20
Add	Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.						
	Health insurance, disabili	Note: Do not include a ty insurance, and health s	any exper savings a	nse allowances ccount expen		ır	
	Health insurance, disabili insurance, disability insurance	Note: Do not include a ty insurance, and health s	any exper savings a	nse allowances ccount expen	s listed in lines 6-24. uses. The monthly expenses for health	r	
	Health insurance, disabili insurance, disability insurary your dependents.	Note: Do not include a ty insurance, and health s	any exper savings a ounts tha	nse allowances ccount expen t are reasonab	s listed in lines 6-24. uses. The monthly expenses for health	r	
	Health insurance, disabili insurance, disability insurar your dependents. Health insurance	Note: Do not include a ty insurance, and health soce, and health savings acc	any expersavings a ounts that	ccount expent are reasonab	s listed in lines 6-24. uses. The monthly expenses for health	r	
	Health insurance, disabili insurance, disability insurar your dependents. Health insurance Disability insurance	Note: Do not include a ty insurance, and health soce, and health savings acc	any expersormers avings a counts that \$	ccount expent are reasonab 344.46 0.00	s listed in lines 6-24. uses. The monthly expenses for health	s	344.46
	Health insurance, disabili insurance, disability insurary your dependents. Health insurance Disability insurance Health savings account	Note: Do not include a ty insurance, and health since, and health savings according to the savin	savings a counts that \$ \$ + \$	ccount expent are reasonab 344.46 0.00 0.00	s listed in lines 6-24. ISES. The monthly expenses for health ly necessary for yourself, your spouse, o		344.46
	Health insurance, disabili insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	Note: Do not include a ty insurance, and health since, and health savings according to the savin	savings a counts that \$ \$ + \$	ccount expent are reasonab 344.46 0.00 0.00	s listed in lines 6-24. ISES. The monthly expenses for health ly necessary for yourself, your spouse, o		344.46
25.	Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this in the properties of the properti	Note: Do not include a ty insurance, and health s ice, and health savings acc total amount? ou actually spend? to the care of household c onable and necessary care of your immediate family w	savings a counts that \$ + \$ s or family and suppho is unal	ccount expent are reasonab 344.46 0.00 0.00 344.46 members. The port of an elder ole to pay for s	c actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may		344.46
25.	Health insurance, disabili insurance, disability insurancy your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this in the savings account in the savi	Note: Do not include a ty insurance, and health since, and health savings according to tall amount? The care of household conable and necessary care of your immediate family what account of a qualified ABLE violence. The reasonably respectively.	savings a counts that \$ \$ * or family and suppho is unal program. necessary	members. The port of an elder ole to pay for s	c actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may	\$\$	

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ebtor 1	Daniel D Lane	Case n	umber (if known)	21-2	2168		
	Additional home energy costs. Your homine 8.	e energy costs are included in your insurance a	nd operating	expens	es on		
	f you believe that you have home energy on the fill in the excess amount of home er	osts that are more than the home energy costs nergy costs	included in e	xpenses	on line	;	
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must sho	ow that the a	dditional		\$_	0.00
;	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expendent children who are younger than 18 year	repenses (not is old to atter	more that and a priva	an ate or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must export already accounted for in lines 6-23.	olain why the	amount			
,	Subject to adjustment on 4/01/22, and even	ery 3 years after that for cases begun on or after	the date of	adjustme	nt.	\$	0.00
I	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
		ional allowance, go online using the link specific so be available at the bankruptcy clerk's office.	ed in the sepa	arate			
•	You must show that the additional amount	claimed is reasonable and necessary.				\$_	25.00
	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).						
I	Do not include any amount more than 15%	of your gross monthly income.				\$_	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.				\$_	369.46
Dedu	ctions for Debt Payment						
		in property that you own, including home mo	ortgages, ve	hicle			
	ans, and other secured debt, fill in lines	•					
T ₀	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due t nkruptcy. Then divide by 60.	o each secu	red			
	Mortgages on your home					Avera paym	ge monthly
33a.	Copy line 9b here				=>	\$	567.61
	Loans on your first two vehicles					*—	
33b.	•				=>	\$	221.40
33c.						ф Ф	-
33C.	Copy line 13e nere				=>	Φ	0.00
33d. Name	List other secured debts: of each creditor for other secured debt	Identify property that secures the debt	inc	es paym	es		
			or \Box	insuranc	e?		
	NONE						
	-NONE-		□	Yes		\$	
				No			
						\$	
				Yes		\$	
				Yes		· —	
				Yes	+	\$	

Daniel D Lane Case number (*if known*) 21-22168 Debtor 1 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount 2770 Columbia Avenue Pittsburgh, PA 15221 Allegheny County Residence Fair Market Value Determined By **2.425.69** ÷ 60 = \$ **Quicken Loans** 40.43 Comparable Sales $\div 60 =$ \$ $\div 60 = +$ \$ Сору total 40.43 40.43 \$ Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 3,600.00 ÷60 \$ 60.00 36. Projected monthly Chapter 13 plan payment 1,023.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 4.00 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 40.92 40.92 Average monthly administrative expense here=> 930.36 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 3,557.20 expense allowances Copy line 32, All of the additional expense deductions \$ 369.46 Copy line 37, All of the deductions for debt payment +\$ 930.36 4,857.02 4,857.02 Total deductions..... \$ Copy total here=> \$

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Jebtor 1	Dan	iei D Lane)		_	Case	number (<i>if known</i>	21-22	108	
Part 2:	De	termine Yo	ur Disposable Income Under 1	1 U.S.C. § 1325	(b)(2)					
			rrent monthly income from line Current Monthly Income and C					\$		5,113.10
d re	children lisability eceived	The month payments f in accordar	bly necessary income you rece nly average of any child support p for a dependent child, reported in nce with applicable nonbankrupto ended for such child.	payments, foster Part I of Form 1	care payments, o 22C-1, that you	r	\$	0.00		
e ir	mployer n 11 U.S	r withheld fr S.C. § 541(b	retirement deductions. The more on wages as contributions for quality (7) plus all required repayments 0. § 362(b)(19).	alified retiremer	nt plans, as specifi		\$	352.09	-	
42. T	otal of	all deduction	ons allowed under 11 U.S.C. §	707(b)(2)(A). Co	py line 38 here	=>	\$	4,857.02		
e tl	expense: heir exp	s and you ha	cial circumstances. If special cir ave no reasonable alternative, do must give your case trustee a de documentation for the expenses.	escribe the spec	ial circumstances	and				
Desc	cribe the	e special ci	ircumstances		Amount of ex	pen	se			
					\$					
					\$					
					\$					
							0			
				Total \$	0.00)	Copy here=> \$		0.00	
								Co		
44. T	otal ad	justments.	Add lines 40 through 43.		=>	\$_	5,209).11 he	re=> - \$	5,209.11
		•	nthly disposable income under	§ 1325(b)(2). S	ubtract line 44 froi	m lin	e 39.		\$	-96.01
Part 3:	Ch	ange in Inc	come or Expenses							
h ti y	nave cha ime you rou filed	anged or are r case will b your petition	or expenses. If the income in Formation to change after the open, fill in the information below, check 122C-1 in the first colunt in when the increase occurred, a	the date you file ow. For example nn, enter line 2 i	d your bankruptcy , if the wages repo n the second colur	petinorted	tion and during increased at	ng the fter		
Form		Line	Reason for change		Date of char	ge	Increase decrease		mount of chan	ge
□ 12 □ 13	22C-1 22C-2						☐ Increa			
							_			
	22C-2						_ Decre			
□ 12	22C-1						□ Increa			
	22C-2						_ Decre			
							☐ Increa			
⊔ 12	22C-2						_ Decre	ase \$	-	

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Debtor 1	Daniei D Lane	Case number (if known)	21-22168
	_		
Part 4:	Sign Below		
	By signing here, under penalty of perjury you declare that th	ne information on this statement and in any atta	achments is true and correct.
	/s/ Daniel D Lane		
	Daniel D Lane Signature of Debtor 1		
_	November 7, 2021 MM / DD / YYYY		
	ואוואו / טט / זוזז		

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Debtor 1 Daniel D Lane Case number (if known) 21-22168

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 04/01/2021 to 09/30/2021.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: PNC Park - Part-Time (seasonal)

Income by Month:

6 Months Ago:	04/2021	\$125.00
5 Months Ago:	05/2021	\$125.00
4 Months Ago:	06/2021	\$125.00
3 Months Ago:	07/2021	\$125.00
2 Months Ago:	08/2021	\$0.00
Last Month:	09/2021	\$0.00
	Average per month:	\$83.33

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: TransCore

Year-to-Date Income:

Starting Year-to-Date Income: \$12,492.00 from check dated 3/31/2021 Ending Year-to-Date Income: \$42,670.59 from check dated 9/30/2021 .

Income for six-month period (Ending-Starting): **\$30,178.59**.

Average Monthly Income: \$5,029.77.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7 :	Liquidation
Ç	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
Ş	338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 21-22168-JAD Doc 22 Filed 11/07/21 Entered 11/07/21 04:42:05 Desc Main Page 49 of 51 Document

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In re	Daniel D Lane		Case No.	21-22168
		Debtor(s)	Chapter	13

	Debtor(s)	Chapter	13					
	DISCLOSURE OF COMPENSATION OF ATTOR	NEY FOR DI	EBTOR(S)					
1.	1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	r agreed to be paid	to me, for services rendered or to					
	For legal services, I have agreed to accept	. \$	5,000.00					
	Prior to the filing of this statement I have received		1,000.00					
	Balance Due		4,000.00					
2.	2. The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	3. The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	4. I have not agreed to share the above-disclosed compensation with any other person ur	nless they are mem	bers and associates of my law firm.					
	☐ I have agreed to share the above-disclosed compensation with a person or persons wh copy of the agreement, together with a list of the names of the people sharing in the co							
5.	5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determing. Preparation and filing of any petition, schedules, statement of affairs and plan which in c. Representation of the debtor at the meeting of creditors and confirmation hearing, and d. [Other provisions as needed] Meeting with client, analysis of the problems, preparation and filing 341 Meeting, normal correspondence with creditors, trustees, and correspondence of a Plan, attendance at the confirmation hearing, and respondence with creditors. 	nay be required; any adjourned hea of the schedule lients. In Chapte	urings thereof; s, attendance at one Section er 13 cases, it also includes					
6.	6. By agreement with the debtor(s), the above-disclosed fee does not include the following s Unless specifically noted above or in a separate written fee agreeme documents or attendance at hearings associated with objections to stay, amended Chapter 13 plans in response to motions to allow cla amended Chapter 13 plans in response to post-petition changes in r applications for counsel fees, motions and amended plans pursuant motions filed by creditors or the Chapter 13 trustee, responses to Clapses to motions to dismiss filed by creditors or the Chapter 13	ent, services do claims, respons ims by utility co regular monthly to post-petition hapter 13 truste	ses to motions for relief from empanies or other claimants, mortgage payments, n financing, responses to any e's certificates of default,					

responses to motions to dismiss filed by creditors or the Chapter 13 trustee, complaints objecting to secured status, motions to allow the sale of property, amended Chapter 13 plans prepared at the client's request due to post-confirmation changes in circumstances, amendments to the debtor's schedules to add creditors not initially disclosed by the client, loss mitigation, and any other work performed by counsel above and beyond the services included in paragraph 6 above. all costs associated with the bankruptcy; fees and costs for converting and completing case under another chapter; re-opening case after closed; state court proceedings, including foreclosure and/or creditor lawsuits; fees and costs related to post-petition employment of professionals, approval of lawsuit Should any of the aforementioned issues arise during the case, or any other additional work become necessary, client shall be responsible for incurred fees and costs at the time said services become necessary at a rate of \$350.00 per hour. The rates of \$350.00 per hour may be increased up to 10% per year after the filing of the Chapter 13 case. The rate for work performed by a paralegal is \$100.00 per hour subject to a 10% increase per year after filing. Any additional fees that may be charged are subject to the approval of the Bankruptcy Court.

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In re	Daniel D Lane	Case No. 21-22168	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sneet)					
CERTIFICATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.					
November 7, 2021 Date	/s/ Lawrence W Willis Esq Lawrence W Willis Esq 85299 Signature of Attorney Willis & Associates 201 Penn Center Suite 310 Pittsburgh, PA 15235 412-235-1721 Fax: 412-542-1704 lawrencew@urfreshstrt.com Name of law firm				

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United States Bankruptcy Court Western District of Pennsylvania

In re	Daniel D Lane		Case No.	21-22168
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies	that the attached list of creditors is true and correct to the best of his/her knowledge.
Date: November 7, 2021	/s/ Daniel D Lane
	Daniel D Lane
	Signature of Debtor